with the full list of names. Do not include addresses here.,

UNITED STATES DISTRICT COURT

	for the	·	
	District of	<u> </u>	
	Di	vision	
	,	Case No.	
Plaintiff(s) Plaintiff(s) (Write the full name of each plaintiff who is filing this of the names of all the plaintiffs cannot fit in the space of please write "see attached" in the space and attach an	complaint.) above,)		(to be filled in by the Clerk's Office)
page with the full list of names.) -v-)		RECEIVED
Clark stille Police Depty Hilfon Garden Inn/Desittotel)		APR 052024
Defendant(s) (Write the full name of each defendant who is being sue) ed. If the)		U.S. District Count Middle District of The
names of all the defendants cannot fit in the space aboverite "see attached" in the space and attach an addition			

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

I. The Parties to This Complaint

A. The Plaintiff(s)

Name	Cael Kerry Von Erick Corey
All other names by which	
you have been known:	
ID Number	72119
Current Institution	Montagnery County Jail
Address	116 Commerce 5t
	Clarksville Tn 37040
	City State Zip Code
The Defendant(s)	
Provide the information below for	or each defendant named in the complaint, whether the defendant is an
individual, a government agency	, an organization, or a corporation. Make sure that the defendant(s)
	e contained in the above caption. For an individual defendant, include
the person's job or title (if known)	and check whether you are bringing this complaint against them in their
individual capacity or official ca	and check whether you are bringing this complaint against them in their pacity, or both. Attach additional pages if needed.
individual capacity or official cap Defendant No. 1	pacity, or both. Attach additional pages if needed.
individual capacity or official cap	pacity, or both. Attach additional pages if needed.
individual capacity or official cap Defendant No. 1	and check whether you are bringing this complaint against them in their pacity, or both. Attach additional pages if needed. Hilton Garden Inn
individual capacity or official cap Defendant No. 1 Name	pacity, or both. Attach additional pages if needed.
individual capacity or official cap Defendant No. 1 Name Job or Title (if known)	pacity, or both. Attach additional pages if needed.
individual capacity or official cap Defendant No. 1 Name Job or Title (if known) Shield Number	pacity, or both. Attach additional pages if needed. Hilton Garden Inn
individual capacity or official cap Defendant No. 1 Name Job or Title (if known) Shield Number Employer	corporation Dosi Hotol Goova 290 Alfred Thun Fal Clarksville Ta 37040
individual capacity or official cap Defendant No. 1 Name Job or Title (if known) Shield Number Employer	corps of the Dosi Hotel Grove 290 Alfred Thun Kol Clarks wille The 37040 City State Zip Code
individual capacity or official cap Defendant No. 1 Name Job or Title (if known) Shield Number Employer	pacity, or both. Attach additional pages if needed. Hilton Garden Inn corporation Dosi Hotol Grove 290 Alfred Thun Kd Ckelsville In 37040
individual capacity or official cap Defendant No. 1 Name Job or Title (if known) Shield Number Employer	corps of the Dosi Hotel Grove 290 Alfred Thun Fol Clarks wille City State Zip Code
individual capacity or official cap Defendant No. 1 Name Job or Title (if known) Shield Number Employer	corps of the Dosi Hotel Grove 290 Alfred Thun Kol Clarks wille The 37040 City State Zip Code
individual capacity or official cap Defendant No. 1 Name Job or Title (if known) Shield Number Employer Address	corps of the Dosi Hotel Grove 290 Alfred Thun Kol Clarks wille The 37040 City State Zip Code
individual capacity or official cap Defendant No. 1 Name Job or Title (if known) Shield Number Employer Address Defendant No. 2 Name Job or Title (if known)	corps of an Dosi Hotol Grova 290 Alfred Thun Kal Clarks wille The 37040 City State Zip Code
individual capacity or official cap Defendant No. 1 Name Job or Title (if known) Shield Number Employer Address Defendant No. 2 Name	corps of an Dosi Hotol Grova 290 Alfred Thun Kal Clarks wille The 37040 City State Zip Code
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individual capacity or official cap Defendant No. 1 Name Job or Title (if known) Shield Number Employer Address Defendant No. 2 Name Job or Title (if known) Shield Number	corps of at an Opsi Hotel Grove 290 Alfred Thun Kol Clarks wille The 37040 City State Zip Code

	Defendant No. 3	
	Name	
	Job or Title (if known)	
	Shield Number	
	Employer	
	Address	
		City State Zip Code
		Individual capacity Official capacity
1,		
	Defendant No. 4	
•	Name	
	Job or Title (if known)	
	Shield Number	
	Employer	
	Address	
		City State Zip Code
	s for Jurisdiction	Individual capacity Official capacity
Und imm Fede	er 42 U.S.C. § 1983, you may sue sta unities secured by the Constitution a eral Bureau of Narcotics, 403 U.S. 38	Individual capacity Official capacity official capacity
Und imm Fede	er 42 U.S.C. § 1983, you may sue sta	ate or local officials for the "deprivation of any rights, privileges, or and [federal laws]." Under Bivens v. Six Unknown Named Agents of
Und imm Fede	er 42 U.S.C. § 1983, you may sue sta unities secured by the Constitution a eral Bureau of Narcotics, 403 U.S. 38	ate or local officials for the "deprivation of any rights, privileges, or nd [federal laws]." Under <i>Bivens v. Six Unknown Named Agents of 88 (1971)</i> , you may sue federal officials for the violation of certain
Und imm Fede cons	er 42 U.S.C. § 1983, you may sue sta unities secured by the Constitution a eral Bureau of Narcotics, 403 U.S. 38 titutional rights.	ate or local officials for the "deprivation of any rights, privileges, or and [federal laws]." Under Bivens v. Six Unknown Named Agents of 88 (1971), you may sue federal officials for the violation of certain seek all that apply):
Und imm Fede cons	er 42 U.S.C. § 1983, you may sue sta unities secured by the Constitution at eral Bureau of Narcotics, 403 U.S. 38 stitutional rights. Are you bringing suit against (che	te or local officials for the "deprivation of any rights, privileges, or nd [federal laws]." Under Bivens v. Six Unknown Named Agents of 88 (1971), you may sue federal officials for the violation of certain seek all that apply):
Und imm Fede cons	er 42 U.S.C. § 1983, you may sue statunities secured by the Constitution a eral Bureau of Narcotics, 403 U.S. 38 stitutional rights. Are you bringing suit against (che Federal officials (a Bivens of State or local officials (a § 1) Section 1983 allows claims alleg the Constitution and [federal law	the or local officials for the "deprivation of any rights, privileges, or and [federal laws]." Under Bivens v. Six Unknown Named Agents of 88 (1971), you may sue federal officials for the violation of certain seck all that apply): laim) 983 claim) ing the "deprivation of any rights, privileges, or immunities secured by s]." 42 U.S.C. § 1983. If you are suing under section 1983, what
Und imm Fede cons	er 42 U.S.C. § 1983, you may sue statunities secured by the Constitution at eral Bureau of Narcotics, 403 U.S. 38 stitutional rights. Are you bringing suit against (che	the or local officials for the "deprivation of any rights, privileges, or and [federal laws]." Under Bivens v. Six Unknown Named Agents of 88 (1971), you may sue federal officials for the violation of certain seek all that apply): laim) 983 claim) ing the "deprivation of any rights, privileges, or immunities secured by s]." 42 U.S.C. § 1983. If you are suing under section 1983, what

	. v	16) Complaint for Violation of Civil Rights (Prisoner)
	D.	Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia. 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under <i>Bivens</i> , explain how each defendant acted under color of
		federal law. Attach additional pages if needed.
	Prison	ner Status
	Indicat	te whether you are a prisoner or other confined person as follows (check all that apply):
		Pretrial detainee
		Civilly committed detainee
		Immigration detainee
: :		Convicted and sentenced state prisoner
		Convicted and sentenced federal prisoner
		Other (explain)
		1000년 10월 12일 - 12일 - 12일 전 12일
•	Statem	ent of Claim
	alleged further any cas	s briefly as possible the facts of your case. Describe how each defendant was personally involved in the wrongful action, along with the dates and locations of all relevant events. You may wish to include details such as the names of other persons involved in the events giving rise to your claims. Do not cit ses or statutes. If more than one claim is asserted, number each claim and write a short and plain of each claim in a separate paragraph. Attach additional pages if needed.
	A.	If the events giving rise to your claim arose outside an institution, describe where and when they aros
		Attle Hilton Gordon Inn Friday Objez /2023
•	B.	If the events giving rise to your claim arose in an institution, describe where and when they arose.

C. What date and approximate time did the events giving rise to your claim(s) occur?

Friday 06/23/2023 - 2135 Am

What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? What are the facts underlying your claim(s)? (For example: What happened to you? Who did what?

Was anyone else involved? Who else saw what happened?) I was given merit to be frevo

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Library and personal attraction

Library fine room the kindy Attendant Juttlian Grimald;

She tripped over my feet begins we want suppose to be in the room

and I wasn't trip to mess up the room, Later she called the policiand

Said Tabused her

V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

foodday Junt to befine neighty compansated for my time wrongfully incorrected

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

If yes, name the jail, prison, or other correctional facility where you were confined at the time events giving rise to your claim(s). Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure? Yes Do not know Does the grievance procedure at the jail, prison, or other correctional facility where your claim cover some or all of your claims? Yes No Do not know					
Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure? Yes No Do not know Does the grievance procedure at the jail, prison, or other correctional facility where your claim cover some or all of your claims? Yes No Do not know			facility where y	ou were confi	ned at the time of
Procedure? ☐ Yes ☐ Do not know ☐ Do not know ☐ Does the grievance procedure at the jail, prison, or other correctional facility where your claim cover some or all of your claims? ☐ Yes ☐ No ☐ Do not know ☐ Do not know	events giving rise to your ca	ann(s).			
Procedure? ☐ Yes ☐ Do not know ☐ Do not know ☐ Does the grievance procedure at the jail, prison, or other correctional facility where your claim cover some or all of your claims? ☐ Yes ☐ No ☐ Do not know ☐ Do not know				• .	
Procedure? ☐ Yes ☐ Do not know ☐ Do not know ☐ Does the grievance procedure at the jail, prison, or other correctional facility where your claim cover some or all of your claims? ☐ Yes ☐ No ☐ Do not know ☐ Do not know					
Procedure? ☐ Yes ☐ Do not know ☐ Do not know ☐ Does the grievance procedure at the jail, prison, or other correctional facility where your claim cover some or all of your claims? ☐ Yes ☐ No ☐ Do not know ☐ Do not know		·			
Procedure? ☐ Yes ☐ Do not know ☐ Do not know ☐ Does the grievance procedure at the jail, prison, or other correctional facility where your claim cover some or all of your claims? ☐ Yes ☐ No ☐ Do not know ☐ Do not know					
☐ Yes ☐ Do not know ☐ Do not know Does the grievance procedure at the jail, prison, or other correctional facility where your claims? ☐ Yes ☐ No ☐ Do not know ☐ Do not know		r correctional facility	where your clai	m(s) arose h a	ve a grievance.
Do not know Does the grievance procedure at the jail, prison, or other correctional facility where your claims? Yes No Do not know	procedure?				
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cover some or all of your claims? Yes No Do not know		The second second second	क्रमा है, इंग्रेसरी अंशरीकी विशेषक है। -	ting more and incomedia	
Yes No Do not know			r other correction	nal facility w	here your claim
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	☑ No	•	•		
	i. □ia. vai i. i.	•			
TC 111 11 ()0	Do not know				
If ves which claim(s)?	Bo hot know			•	
ii yes, winen oldini(s):					
	f yes, which claim(s)?			•	

D.		you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose erning the facts relating to this complaint?
		Yes
		∜No
		, did you file a grievance about the events described in this complaint at any other jail, prison, or correctional facility?
		Yes
		Ño
E.	If yo	u did file a grievance:
	1.	Where did you file the grievance?
	2.	What did you claim in your grievance?
:		
1. 1.		
- - 	3.	What was the result, if any?
	J.	What was the result, if any?
	•	
	4.	What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)
• .	•	
	-	

F.	If you did not file a grievance:
	1. If there are any reasons why you did not file a grievance, state them here:
	2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:
1 2	
G.	Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.
-	Temeures.
	(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your
	administrative remedies.)
Previou	is Lawsuits
The "th	ree strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying
the filin brought malicion	g fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, us, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent of serious physical injury." 28 U.S.C. § 1915(g).
To the b	pest of your knowledge, have you had a case dismissed based on this "three strikes rule"?
Ye:	
1 No	
If yes, s	tate which court dismissed your case, when this occurred, and attach a copy of the order if possible.

	Yes
	and the state of the section of the state of the state descending as for professional particles of the section
Ify	your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If
	re than one lawsuit, describe the additional lawsuits on another page, using the same format.
1	Parties to the previous lawsuit
1.	
	Plaintiff(s)
	Defendant(s)
2.	Court (if federal court, name the district; if state court, name the county and State)
• -	
	The property of the second
3.	Docket or index number
÷	
	在
4.	Name of Judge assigned to your case
	A A Marie Committee Commit
5.	Approximate date of filing lawsuit
6.	Is the case still pending?
	Yes
	No
	If no, give the approximate date of disposition.
	는 사람들이 함께 함께 생각하는 보다는 사람들이 되었다면 보고 있다. 그는 사람들이 하게 되는 것은 것이다는 것이다는 사람들이 되었다. - The Common Common State (1984년 1985년 1987년
7.	What was the result of the case? (For example: Was the case dismissed? Was judgment er in your favor? Was the case appealed?)
	myour jurer. Thus incouse appeared.

IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case—related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	Signature of Plaintiff	CA Comment		
1.1	Printed Name of Plaintiff	CARL Gren		
	Prison Identification #	72/19		
	Prison Address	116 Commerce St		
		Clartsville	Th	37040
		City	State	Zip Code
В.	For Attorneys			
	Date of signing:			
	Signature of Attorney			
	Printed Name of Attorney			
	Bar Number		• • • • • • • • • • • • • • • • • • • •	
	Name of Law Firm			
	Address	- Committee Comm		
•		City	State	Zip Code
	Telephone Number		•	
	E-mail Address		•	:

IN THE UNITED STATES DISTRICT COURT FOR THE MIDDLE DISTRICT OF TENNESSEE

RECEIVED

APR 0 5 2024

U.S. District Court Middle District of TN

College bon Erreb Coily	
Plaintiff(s),	Case Number
V. classille Police Dest/	Judge
Desi Hotel Group / Hilton Gran Son)	Magistrate Judge
Defendant(s).	

(Type of Pleading)

Jam being accused of sexual bothers and I losting Job property and nages. My man and character is being standered and & didn't do Nothing to that woman, I is living on me and playing out to be a victim when I am the victim in this case. The police pept olide to also a proper investigate with assessing her and the situation no photographs or medical after than uses evidence of the common in the Hotel was suppose to be norting and if they were it would prove that Trilian Germaldi is living and tobericated her statement. I don't know how to properly ob this but I don't went to have this to smeas my record so that I won't be able to set a jobs or be ground my kids this is serious and she is toying with my life as is the Policely I reed some assistance, with this paper work.

(Signature)
(Print Name)
(Address & Telephone Number, if any)
(Address & Telephone Number, II any)

CERTIFICATE OF SERVICE The undersigned hereby certifies that the (pleading) has been served on: (Name) (Address) (Address) on the day of , 20 . Signature

CARL CORE TAMA

NASHVILLE TN 370 2 APR 2024 PM 6 L



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APR 0 5 2024

U.S. District Court Middle District of TN Middle District of Fernes = 7/9 church St. Suite 1300 Mashville, Tp 37203

97203-709525

CARLOREY#72119 16 Commerce St., 1040 Clarksville, Th 37040

NASHVILLE TN 370 2 APR 2024 PM 3 L



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APR 052024

U.S. District Court Middle District of TN Middle District of Tennessee 719 Church St, suite 1300 Mashille Tin 37203

97209-709625

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CARE GOREGET 2111 116 Commerce 5+ Clartsville, In 37040

NASHVILLE TN 370 2 APR 2024 PM 6 L



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APR 052024

U.S. District Court Middle District of TN W.S. District of Tennessee Midde District of Tennessee 719 Church St, Suite 1300 Mashville, Tennessee 37203

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